USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF						COURT CASE NUMBER		
United States of America						17-00209		
DEFENDANT YVONNE D. WESTON						TYPE OF PROCESS HANDBILL		
SERVE		FINDIVIDUAL, COMPLANY, DORPORATION ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN IE D. WESTON						
ADDRESS (Street or RED. Apartment No. City, State and 7IP code)								
34 Horizon Drive Fredericksburg, PA 17026-9628								
SEND NOTICE OF SERVICE COPY OF REQUESTER AT NAME AND ADDRESS BELOW						Number of proce served with this		
KML Law Group, P.C. 701 Market						Number of parties to be served in this case		
Suite 5000						Check for service		
Philadelphia, PA 19106						on U.S.A.		
Fig. 1 cm 18								The state of the s
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses All Telephone Numbers and Estimated Times Available for Service) HARRISBURG, PA								
Please post premises by 10/1/2017.								SEP 1 8 2017
								$\wedge \wedge \wedge \wedge$
								HA
Signature of Attorney other Originator requesting service behalf of:						TELEPHONE N	•	DATE
☐ DEFENDANT						215-627-132		8/6/17
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-DO NOT WRITE BELOW THIS LINE								
I acknowledge receipt for the total Total Process District of District to					Signature of Authori	zed USMS Deput	y or Clerk	Date
number of process indica (Sign only for USM 285 i		7	Origin	Serve	6/11/	$(\cdot) < \iota_0$	50 ·	8/14/17
than one USM 285 is sub			No. 6 /	No. 6	11-0010	\bowtie	<u> </u>	
I hereby certify and remm that I \(\) have personally served, \(\) have legal evidence of service, \(\) have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.								
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)								
Name and title of individual served (if not shown above) A person of suitable age and discretion then residing in defendant's usual place								
	·				,		abode	
Address (complete only different than shown above) Date 7/8/7 1045								1045 Dm
						Signati	ure of U.S. Marcha	Lear Deputy
Company (Freel)	1.61	arges Forward	En = Enn	Total Charges	Advance Deposits	Amount owned	to U.S. Marshal* o	
	Mileage Ch		ang ree		Autance Deposits	(Amount of Re	fund*)	" h 1/ () / ()
65 60	= 32,	16		162.10	·	,	\$0.00	\$162.10
REMARKS:								
Posted Property								
			PEIT	4			DRION	TONE MATERIA
2.	CLERK OF USMS REC NOTICE OF)		·	PRIOR EDI	TIONS MAY BE USED

4. BILLING STATEMENT*: To be remined to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/80